

**FEC
FORM 3**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

RECEIVED

2013 APR 18 AM 11:33

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5FEC MAIL CENTER

EWING ILLINOIS COMMITTEE

ADDRESS (number and street)

1647 MOCKINGBIRD LN

Check if different
than previously
reported. (ACC)

PONTIAC

IL 161764-9249

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

000250553

3. IS THIS
REPORT

☒

NEW
(N)

OR

☐

AMENDED
(A)

IL

15

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

☒

April 15 Quarterly Report (Q1)

☐

July 15 Quarterly Report (Q2)

☐

October 15 Quarterly Report (Q3)

☐

January 31 Year-End Report (YE)

☐

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

MM/DD/YYYY

in the
State of

IL

(c) 30-Day POST-Election Report for the:

☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

MM/DD/YYYY

in the
State of

IL

5. Covering Period

MM/DD/YYYY
01/01/2013

through

MM/DD/YYYY
03/31/2013

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer THOMAS W. EWING

Signature of Treasurer

Thomas W. Ewing

Date

MM/DD/YYYY
04/12/2013

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only

FEC FORM 3
(Revised 02/2003)